										Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR Effective December 29, 1999										(791	(5)	06,	(4 J.)
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAL		NTITY	OR	OTHER	
FOR NUMBER FILE				R FILED	NUMBER EXTRA			Γ	RATE		FEE	1	RATE	FEE
BASIC FEE				A	Ų.				's#		345.00	OR	1	690.00
TO	OTAL CLAIMS		19 minus 20=						X\$ 9:	-		OR	X\$18=	
INE	DEPENDENT CL	AIMS	/	minus	3 =	•			X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT							- [/ +130=		OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTA			OR	TOTAL	1090
CLAIMS AS AMENDED - PART II									•		3	OTHER		
	WENT TO THE		umn 1) AMS		((Column 2) HIGHEST	(Column 3)		SMAL	L E	NTITY	OR	SMALL	ENTITY
ENT A		REN Al	IAINING FTER NDMENT			NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENOMENT	Total _	•		Minus	••		= ,		X\$ 9=	-		OR	X\$18=	
AME	Independent	NITATIO	NOT All	Minus	•••		=	Γ	X39=			OR	X78=	
	FIRST PRESE	NIATIO	ON OF MI	JUI IPLE DE	PENI	JENI CLAIM		ſ	+130=			OR	+260=	
Protection of the last of the second of the							L	TOTA				TOTAL ADDIT, FEE		
		(Col	umn 1)		(0	Column 2)	(Column 3)	~			•			i_{i_1}
ENT B	e a jik tog g	REM	AIMS AINING TER IDMENT	, de fina	PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- FEE	7	RATE	ADDI- TIONAL FEE
AMENOMENT	Total	•		Minus	**		=		X\$ 9=			OR	X\$18=	
AME	Independent FIRST PRESE	*		Minus	***		=		X39=			OR	X78=	ų.
	rins) Phese	NIAIIC	. OF MIC	ELIPLE DEF	ENL	JENT CLAIM	الــــــــــــــــــــــــــــــــــــ		+130≂			OR	+260≃	
				·				AE	TOTA			OR ,	TOTAL ADDIT. FEE	
1) 	(Colu	ımn 1)		(C	olumn 2)	(Column 3)							
IENT Q		REM/	aims aining ter dment		PA	HIGHEST NUMBER NEVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
. . }	Total	. 5		Minus	••	20	-38	<u>,</u>	X\$ 9=	T		OR	X\$18=	504
M M	Independent FIRST PRESEN	JTATIO		Minus	ENID	5 ENT CLASS	-	十	X39=	T		OR	X78=	
	· inoi PRESEI	IAIO	IN OF MU	LIFLE DEF		CIAL COVIM			+130 =	1		OR	+260=	
H	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL			OR .	TOTAL	500
****1	f the "Highest Num The "Highest Numb	iber Pre	viously Pal	id For IN THIS	SPA	CE is less than	1 3, enter "3."		DIT. FEI I in the a			-	IDDIT. FEE	1
		,	-	•		•	- ,				. /	1	-CO	1/

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PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
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0110	PAT	ENT APPL	Application or Decket Number							
		CLAIMS A	S FILED olumn 1)	PART I	SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY		
	FOR	NUM	BER FILED	NUMBE	R EXTRA	RATE	FEE		RATE	FEE
	C FEE FR 1.16(a))						s	OR		\$
TOTA	AL CLAIMS FR 1.16(c))		minus 20	= ·		x \$=		OR	x \$=	
INDE	PENDENT CLAIN	ns -	minus 3	= *		X S =		OR	x s =	
(37 CFR 1.16(b)) minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+\$ =		OR	+s =	
					<u> </u>		1			
* If th	e difference in c	olumn 1 is less t	than zero, ent	ter "0" in column 2	TOTAL		OR	TOTAL	L	
CLAIMS AS AMENDED – PART II										
	8/9/4	(Column 1)		(Column 2)	(Column 3)	SMALL E	ENTITY	OR		R THAN ENTITY
A T	21 1-1	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAJD FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MEI	Total	AMENDIVIEN	Minus	WX	=()	x \$ =		OR	× \$=	
AMENDMENT	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	1 1/	Minus	" 3	=(1)	x \$=		OR	x \$=	
M			IDL S DEDENDE	DIT CLAIM (27.09	·			OR	+\$ =	
	FIRST PRESENT	TATION OF MULTI	PLE DEPENDE	NT CLAIM (37 CF	+ \$= TOTAL		1	TOTAL	 	
						ADD'L FEE	L	OR	ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)		,	7		1
NT B		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATF	ADDI- TIONAL FEE
ME	Total (37 CFR 1,16(c))	*	Minus	**	=	x s=		OR	x \$=	
AMENDMENT	Independent (37 CFR 1,16(b))	•	Minus	***	=	x s=		OR	x s=	
AM		TATION OF MULT	IPLE DEPENDE	ENT CLAIM (37 CF	+ \$ =		OR	+\$ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)		,	-1		<u> </u>
NTC		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$=		OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	*	Minus	***	=	x \$=		OR	× \$ =	
AME	FIRST PRESEN	+\$ =		OR	+ \$ =					
<u> </u>	rino i Presen	TATION OF MUCI	EL DEI ENDI	(57 01	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	* If the entry in o	column 1 is less	than the entr	y in column 2, wri " IN THIS SPACE	te "0" in column is less than 20.	3.		_		

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.